

COUNTY OF ALBANY

MC - BID FORM

BID IDENTIFICATION:

Title: Lawson Lake Upper Camp Renovation
Bid Number: 2024-037-MC-Mechanical Construction

Conditions:

1. All bid prices must include all materials, labor, equipment, incidentals and other associated costs.
2. Base Bid work shall carry a 10% Base Bid Contingency Allowance for additional work discovered during construction beyond scope of work indicated on drawings and specifications. Contractor shall receive advance approval from the County Engineer prior to performing any additional work.

LUMP SUM BASE BID: \$ 244,000⁰⁰ (a)

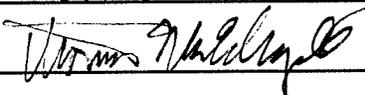
10 % CONTINGENCY ALLOWANCE: \$ 24,400⁻ (b)

TOTAL BID: a+b
(Base Bid + Contingency Allowance) \$ 268,400⁻

ALTERNATE 1 – CABIN 76 \$ 1900⁰⁰

BF3

COMPANY: T. Mcelligott Inc.
ADDRESS: 589 River Street, Troy NY 12180

CITY, STATE, ZIP: Troy NY 12180
TEL. NO.: 518.274.9225
FAX NO.: 518.274.8679
FEDERAL TAX ID NO.: 14-1800988
REPRESENTATIVE: Thomas McElligott
E-MAIL: Matt@tmcelligottinc.com
SIGNATURE AND TITLE , President
DATE 4/4/2024

BF4

COUNTY OF ALBANY

REQUEST FOR BIDS ALBANY COUNTY DEPARTMENT OF GENERAL SERVICES



RFB #2024-037

LAWSON LAKE UPPER CAMP RENOVATION

**ALBANY COUNTY DEPARTMENT OF GENERAL SERVICES
PURCHASING DIVISION
PAMELA O NEILL, PURCHASING AGENT
112 STATE STREET, ROOM 1000
ALBANY, NY 12207**

COUNTY OF ALBANY

MC- BID FORM

BID IDENTIFICATION:

Title: **Lawson Lake Upper Camp Renovation**
Bid Number: **2024-037-MC-Mechanical Construction**

THIS BID IS SUBMITTED TO:

Pamela O'Neill, CPPB, Purchasing Agent
Albany County Department of General Services
Purchasing Division
112 State Street, Room 1000
Albany, NY 12207

1. The undersigned BIDDER proposes and agrees, if this Bid is accepted, to enter into a Contract with the owner in the form included in the Contract Documents to complete all Work as specified or indicated in the Contract Documents for the Contract Price and within the Contract Time indicated in this Bid and in accordance with the Contract Documents.
2. BIDDER accepts all of the terms and conditions of the Instructions to Bidders, including without limitation those dealing with the Disposition of Bid Security. This Bid may remain open for ninety (90) days after the day of Bid opening. BIDDER will sign the Contract and submit the Contract Security and other documents required by the Contract Documents within fifteen days after the date of OWNER'S Notice of Award.
3. In submitting this Bid, BIDDER represents, as more fully set forth in this Contract, that:

- (a) BIDDER has examined copies of all the Contract Documents and of the following addenda: (If none, so state)

Addenda 1, 2, 3, 4, 5, 6

(receipt of all of which is hereby acknowledged) and also copies of the Notice to Bidders and the Instructions to Bidders;

- (b) BIDDER has examined the site and locality where the Work is to be performed, the legal requirements (federal, state and local laws, ordinances, rules and regulations) and the conditions affecting cost, progress or performance of the Work and has made such independent investigations as BIDDER deems necessary;

BF1

- (c) This Bid is genuine and not made in the interest of or on behalf of any undisclosed person, firm or corporation and is not submitted in conformity with any agreement or rules of any group, association, organization or corporation; BIDDER has not directly or indirectly induced or solicited any other BIDDER to submit a false or sham Bid; BIDDER has not solicited or induced any person, firm or a corporation to refrain from bidding; and BIDDER has not sought by collusion to obtain for himself any advantage over any other Bidder or over the owner.
- 4. BIDDER will complete the Work for the following prices(s): (Attach Bid Proposal)
 - 5. BIDDER agrees to commence the Work within the number of calendar days or by the specific date indicated in the Contract. BIDDER agrees that the Work will be completed within the number of Calendar days or by the specific date indicated in the contract.
 - 6. The following documents are attached to and made a condition of this Bid:
 - (a) Non-Collusive Bidding Certificate (Attachment "A")
 - (b) Acknowledgment by Bidder (Attachment "B")
 - (c) Vendor Responsibility Questionnaire (Attachment "C")
 - (d) Iranian Energy Divestment Certification (Attachment "D")
 - (e) MS-4-1 Certification Statement RE: Stormwater Discharges (Attachment "E")
 - (f) Bidder Qualification Questionnaire (Attachment "F")
 - (g) Non Interruption of Work Agreement (Attachment "G")
 - (h) Required Apprenticeship Training Program Documentation (refer to RFB Section 27)
 - 7. Communication concerning this Bid shall be addressed to:

Pamela O'Neill, CPPB, Purchasing Agent
Albany County Department of General Services, Purchasing Division
112 State Street, Room 1000, Albany, NY 12207
Phone: 518-447-7139
 - 8. Terms used in this Bid have the meanings assigned to them in the Contract and General Provisions.

ATTACHMENT "A"
NON-COLLUSIVE BIDDING CERTIFICATE PURSUANT TO
SECTION 103-D OF THE NEW YORK STATE GENERAL MUNICIPAL LAW

A. By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid, each party thereto certifies as to its own organizations, under penalty of perjury, that to the best of knowledge and belief:

(1) The prices in this bid have been arrived at independently without collusion, consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor.

(2) Unless otherwise required by law, the prices which have been quoted in this bid have not knowingly been disclosed by the bidder and will not knowingly be disclosed by the bidder, directly or indirectly, prior to opening, to any bidder or to any competitor.

(3) No attempt has been made or will be made by the bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

A bid shall not be considered for award nor shall any award be made where (1), (2), and (3) above have not been complied with; provided, however, that in any case the bidder cannot make the foregoing certification, the bidder shall so state and shall furnish with the bid a signed statement which sets forth in detail the reasons thereof. Where (1), (2), and (3) above have not been complied with, the bid shall not be considered for any award nor shall any award be made unless the head of the Purchasing Unit to the political subdivision, public department, agency or official thereof to which the bid is made, or his designee, determines that such disclosure was not made for the purpose of restricting competition.

The fact that a bidder (a) has published price lists, rates, or tariffs covering items being procured, (b) has informed prospective customer of proposed or pending publication of new or revised price lists for such items, or (c) has sold the same items to other customers at the same prices being bid, does not constitute, without more, a disclosure within the meaning of paragraph "A" above.

B. Any bid hereafter made to any political subdivision of the state or any public department, agency or official thereof by a corporate bidder for work or services performed or to be performed or goods sold or to be sold, where competitive bidding is required by statute, rule, regulation, local law, and where such bid contains the certification referred to in paragraph "A" of this section, shall be deemed to have been authorized by the Board of Directors of the bidder, and such authorization shall be deemed to include the submission of the bid and the inclusion therein of the certificate as to non-collusion as the act and deed of the corporation



Signature

President

Title

T. McElligott Inc.

Company Name

4 / 1 / 24

Date

ATTACHMENT "B"
ACKNOWLEDGMENT BY BIDDER

If Individual or Individuals:

STATE OF _____)
COUNTY OF _____) SS.:

On this _____ day of _____, 200__, before me personally appeared _____ to me known and known to me to be the same person(s) described in and who executed the within instrument, and he (or they severally) acknowledged to me that he (or they) executed the same.

Notary Public, State of _____

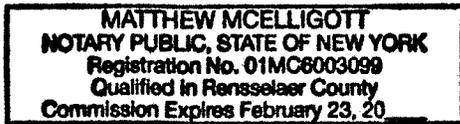
Qualified in _____

Commission Expires _____

If Corporation:

STATE OF New York)
COUNTY OF Rensselaer) SS.:

On this 4 day of April, 2024, before me personally appeared Thomas McElligott to me known, who, being by me sworn, did say that he resides at (give address) Troy NY; that he is the (give title) President of the (name of corporation) T. McElligott Inc., the corporation described in and which executed the above instrument; that he knows the seal of the corporation, and that the seal affixed to the instrument is such corporate seal; that it was so affixed by order of the board of directors of the corporation, and that he signed his name thereto by like order.



[Signature]

Notary Public, State of New York

Qualified in Rensselaer Co.

Commission Expires 2/23/2026

If Partnership:

STATE OF _____)
COUNTY OF _____) SS.:

On the _____ day of _____, 200__, before me personally came _____ to me known to be the individual who executed the foregoing, and who, being duly sworn, did depose and say that he / she is a partner of the firm of _____ and that he / she has the authority to sign the same, and acknowledged that he / she executed the same as the act and deed of said partnership.

Notary Public, State of _____

Qualified in _____

Commission Expires _____

ATTACHMENT "C"
ALBANY COUNTY
VENDOR RESPONSIBILITY QUESTIONNAIRE

1. VENDOR IS: <input checked="" type="checkbox"/> PRIME CONTRACTOR			
2. VENDOR'S LEGAL BUSINESS NAME T. McElligott Inc.		3. IDENTIFICATION NUMBERS a) FEIN # 14-1800988 b) DUNS #	
4. D/B/A – Doing Business As (if applicable) & COUNTY FIELD:		5. WEBSITE ADDRESS (if applicable)	
6. ADDRESS OF PRIMARY PLACE OF BUSINESS/EXECUTIVE OFFICE 589 River Street Troy NY 12180		7. TELEPHONE NUMBER 518-274-9225	8. FAX NUMBER 518-274-8679
9. ADDRESS OF PRIMARY PLACE OF BUSINESS/EXECUTIVE OFFICE <i>IN NEW YORK STATE, if different from above</i>		10. TELEPHONE NUMBER	11. FAX NUMBER
12. AUTHORIZED CONTACT FOR THIS QUESTIONNAIRE Name Matt McElligott Title VP Telephone Number 518-274-9225 Fax Number 518-274-8679 e-mail Matt@tmcelligottinc.com			
13. LIST ALL OF THE VENDOR'S PRINCIPAL OWNERS.			
a) NAME TOM McElligott	TITLE President	b) NAME	TITLE
c) NAME Matt McElligott	TITLE VP	d) NAME	TITLE
A DETAILED EXPLANATION IS REQUIRED FOR EACH QUESTION ANSWERED WITH A "YES," AND MUST BE PROVIDED AS AN ATTACHMENT TO THE COMPLETED QUESTIONNAIRE. YOU MUST PROVIDE ADEQUATE DETAILS OR DOCUMENTS TO AID THE COUNTY IN MAKING A DETERMINATION OF VENDOR RESPONSIBILITY. PLEASE NUMBER EACH RESPONSE TO MATCH THE QUESTION NUMBER.			
14. DOES THE VENDOR USE, OR HAS IT USED IN THE PAST FIVE (5) YEARS, ANY OTHER BUSINESS NAME, FEIN, or D/B/A OTHER THAN THOSE LISTED IN ITEMS 2-4 ABOVE? List all other business name(s), Federal Employer Identification Number(s) or any D/B/A names and the dates that these names or numbers were/are in use. Explain the relationship to the vendor.		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
15. ARE THERE ANY INDIVIDUALS NOW SERVING IN A MANAGERIAL OR CONSULTING CAPACITY TO THE VENDOR, INCLUDING PRICIPAL OWNERS AND OFFICERS, WHO NOW SERVE OR IN THE PAST ONE (1) YEARS HAVE SERVED AS:		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
a) An elected or appointed public official or officer? <i>List each individual's name, business title, the name of the organization and position elected or appointed to, and dates of service</i>		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b) An officer of any political party organization in Albany County, whether paid or unpaid? <i>List each individuals name, business title or consulting capacity and the official political position held with applicable service dates.</i>		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

16.	<p>WITHIN THE PAST (5) YEARS, HAS THE VENDOR, ANY INDIVIDUALS SERVING IN MANAGERIAL OR CONSULTING CAPACITY, PRINCIPAL OWNERS, OFFICERS, MAJOR STOCKHOLDER(S) (10% OR MORE OF THE VOTING SHARES FOR PUBLICLY TRADED COMPANIES, 25% OR MORE OF THE SHARES FOR ALL OTHER COMPANIES), AFFILIATE OR ANY PERSON INVOLVED IN THE BIDDING OR CONTRACTING PROCESS:</p> <p>a) 1. been suspended, debarred or terminated by a local, state or federal authority in connection with a contract or contracting process;</p> <p>2. been disqualified for cause as a bidder on any permit, license, concession franchise or lease;</p> <p>3. entered into an agreement to a voluntary exclusion from bidding/contracting;</p> <p>4. had a bid rejected on an Albany County contract for failure to comply with the MacBride Fair Employment Principles;</p> <p>5. had a low bid rejected on a local, state or federal contract for failure to meet statutory affirmative action or M/WBE requirements on a previously held contract;</p> <p>6. had status as a Women's Business Enterprise, Minority Business Enterprise or Disadvantaged Business Enterprise, de-certified, revoked or forfeited;</p> <p>7. been subject to an administrative proceeding or civil action seeking specific performance or restitution in connection with any local, state or federal government contract;</p> <p>8. been denied an award of a local, state or federal government contract, had a contract suspended or had a contract terminated for non-responsibility; or</p> <p>9. had a local, state or federal government contract suspended or terminated for cause prior to the completion of the term of the contract.</p> <p>b) been indicted, convicted, received a judgment against them or a grant of immunity for any business-related conduct constituting a crime under local, state or federal law including but not limited to, fraud extortion, bribery, racketeering, price-fixing, bid collusion or any crime related to truthfulness and/or business conduct?</p> <p>c) been issued a citation, notice, violation order, or are pending an administrative hearing or proceeding or determination of violations of:</p> <p>1. federal, state or local health laws, rules or regulations.</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
17.	<p>IN THE PAST THREE (3) YEARS, HAS THE VENDOR OR ITS AFFILIATES 1 HAD ANY CLAIMS, JUDGMENTS, INJUNCTIONS, LIENS, FINES OR PENALTIES SECURED BY ANY GOVERNMENTAL AGENCY?</p> <p>Indicate if this is applicable to the submitting vendor or affiliate. State whether the situation(s) was a claim, judgment, injunction, lien or other with an explanation. Provide the name(s) and address(es) of the agency, the amount of the original obligation and outstanding balance. If any of these items are open, unsatisfied, indicate the status of each item as "open" or "unsatisfied."</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
18.	<p>DURING THE PAST THREE (3) YEARS, HAS THE VENDOR FAILED TO:</p> <p>a) file returns or pay any applicable federal, state or city taxes? <i>Identify the taxing jurisdiction, type of tax, liability year(s), and tax liability amount the vendor failed to file/pay and the current status of the liability.</i></p> <p>b) file returns or pay New York State unemployment insurance? <i>Indicate the years the vendor failed to file/pay the insurance and the current status of the liability.</i></p> <p>c) Property Tax <i>Indicate the years the vendor failed to file.</i></p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
19.	<p>HAVE ANY BANKRUPTCY PROCEEDINGS BEEN INITIATED BY OR AGAINST THE VENDOR OR ITS AFFILIATES 1 WITHIN THE PAST SEVEN (7) YEARS (WHETHER OR NOT CLOSED) OR IS ANY BANKRUPTCY PROCEEDING PENDING BY OR AGAINST THE VENDOR OR ITS AFFILIATES REGARDLESS OF THE DATE OF FILING?</p> <p>Indicate if this is applicable to the submitting vendor or affiliate. If it is an affiliate, include the affiliate's name and FEIN. Provide the court name, address and docket number. Indicate if the proceedings have been initiated, remain pending or have been closed. If closed, provide the date closed.</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
20.	<p>IS THE VENDOR CURRENTLY INSOLVENT, OR DOES VENDOR CURRENTLY HAVE REASON TO BELIEVE THAT AN INVOLUNTARY BANKRUPTCY PROCEEDING MAY BE BROUGHT AGAINST IT? Provide financial information to support the vendor's current position, for example, Current Ratio, Debt Ratio, Age of Accounts Payable, Cash Flow and any documents that will provide the agency with an understanding of the vendor's situation.</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>

21. IN THE PAST FIVE (5) YEARS, HAS THE VENDOR OR ANY AFFILIATES¹ :

Yes No

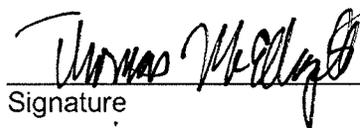
a) defaulted or been terminated on, or had its surety called upon to complete, any contract (public or private) awarded;

Indicate if this is applicable to the submitting vendor or affiliate. Detail the situation(s) that gave rise to the negative action, any corrective action taken by the vendor and the name of the contracting agency.

¹ "Affiliate" meaning: (a) any entity in which the vendor owns more than 50% of the voting stock; (b) any individual, entity or group of principal owners or officers who own more than 50% of the voting stock of the vendor; or (c) any entity whose voting stock is more than 50% owned by the same individual, entity or group described in clause (b). In addition, if a vendor owns less than 50% of the voting stock of another entity, but directs or has the right to direct such entity's daily operations, that entity will be an "affiliate" for purposes of this questionnaire.

Attachment "D"
Certification Pursuant to Section 103-g
Of the New York State
General Municipal Law

- A. By submission of this bid/proposal, each bidder/proposer and each person signing on behalf of any bidder/proposer certifies, and in the case of a joint bid, each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each bidder is not on the list created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the New York State Finance Law.
- B. A Bid/Proposal shall not be considered for award, nor shall any award be made where the condition set forth in Paragraph A above has not been complied with; provided, however, that in any case the bidder/proposer cannot make the foregoing certification set forth in Paragraph A above, the bidder/proposer shall so state and shall furnish with the bid a signed statement which sets forth in detail the reasons therefor. Where Paragraph A above cannot be complied with, the Purchasing Unit to the political subdivision, public department, agency or official thereof to which the bid/proposal is made, or his designee, may award a bid/proposal, on a case by case business under the following circumstances:
1. The investment activities in Iran were made before April 12, 2012, the investment activities in Iran have not been expanded or renewed after April 12, 2012, and the Bidder/Proposer has adopted, publicized and is implementing a formal plan to cease the investment activities in Iran and to refrain from engaging in any new investments in Iran; or
 2. The political subdivision makes a determination that the goods or services are necessary for the political subdivision to perform its functions and that, absent such an exemption, the political subdivision would be unable to obtain the goods or services for which the contract is offered. Such determination shall be made in writing and shall be a public document.



Signature

President

Title

T. McElligott Inc.

Company Name

4/4/24

Date

ATTACHMENT "E"

Sheet MS4-1: Bidder/Proposer Certification Statement
(to be used with Section 34 Part A – General Contracts)

As a bidder seeking to provide services on behalf of Albany County, I certify under penalty of law that I understand and agree to comply with the terms and conditions of the New York State Pollutant Discharge Elimination System ("SPDES") General Permit for Stormwater Discharges from Municipal Separate Storm Sewer Systems (MS4 Permit) and Albany County Local Law 7 of 2007, and agree to implement any Best Management Practices or corrective actions identified by Albany County or an authorized representative thereof as necessary to maintain compliance. I understand that Albany County must comply with the terms and conditions of the aforementioned MS4 Permit, and that it is unlawful for any person to directly or indirectly cause or contribute to a violation of water quality standards. I am also aware that County Local Law 7 of 2007 prohibits any activities that cause or contribute to a violation of the County's SPDES permit. Further, I understand that any non-compliance by Albany County will not diminish, eliminate or lessen my own liability.

Name of Third Party Entity: T. McElligott Inc.
Address: 589 River Street.
Troy NY 12180
Phone Number(s): 518.274.9225

Description of activities to be performed by your firm or organization within Albany County are related to the Albany County Storm Water Management Program (SWMP) (include any activities that have the potential to generate or prevent pollution and/or affect water quality):

New HVAC

Description of where the work is to be performed within Albany County facilities:

Lawson Lake Camp Ground

Thomas McElligott
Signature

Thomas McElligott
Printed Name

President
Title

4/4/24
Date

ATTACHMENT "F"
BIDDER QUALIFICATION QUESTIONNAIRE

** See attached*

The undersigned guarantees the accuracy of all statements and answers herein contained. (Please print in ink or type in the spaces provided). Attach additional sheets if necessary. This statement of Bidder's qualifications is required of all Bidders. Additional data on Bidder's qualifications may be requested from selected Bidders after the Bid opening.

1. How many years has your firm been in business? _____ years

2. List up to three (3) projects of this nature that you have completed in the last three (3) years, and give the name, address and telephone number of a reference from each. Also give the completion date, the original contract bid price and the completed cost of each project listed.

1. _____

2. _____

3. _____

ATTACHMENT "F"
BIDDER QUALIFICATION QUESTIONNAIRE

3. List projects presently under contract by your firm, the dollar volume of the contract and the percentage completion of the contract.

4. Has your firm ever failed to complete work awarded to it, if so, state where and why.

5. Is your firm presently or has your firm ever been a party defendant in a lawsuit commenced against your firm alleging failure to properly complete work in accordance with the contract for same; if so, give details.

ATTACHMENT "F"
BIDDER QUALIFICATION QUESTIONNAIRE

6. Has your firm received two (2) final determinations within any consecutive six-year period, the second final determination occurring within the past five (5) years, that your firm willfully failed to pay the prevailing rate of wages or to provide supplements with Article 8 of the Labor Law, if so, give details.

7. Do you plan to sublet any part of this work? If so, give details.

8. Give the name, address and telephone number of an individual who represents each of the following and whom the Owner may contact to investigate your financial responsibility: a surety, and a bank.

ATTACHMENT "F"
BIDDER QUALIFICATION QUESTIONNAIRE

9. Give a summary of your financial statement. (List assets and liabilities, use an insert sheet, if needed).

10. State the true, exact, correct and complete name of the partnership, corporation or trade name under which you do business, and the address of the place of business. (If a corporation, state the name and title of all officers. If a partnership, state the name of all partners. If a trade name, state the names of the individuals who do business under the trade name.) It is absolutely necessary that information be furnished.

Correct Name of Bidder

(a) The business is a: _____

(b) The address of principal place of business is: _____

(c) The names of the corporate officers, or partners, or individuals doing business under a trade name, are as follows:

ATTACHMENT "F"
BIDDER QUALIFICATION QUESTIONNAIRE

11. Is your firm qualified to do business in the State of New York? Yes ____ No ____.
If No, signing this qualification statement constitutes agreement to obtain such qualification prior to award of contract immediately upon owner's request.

Firm

Dated: _____

By _____

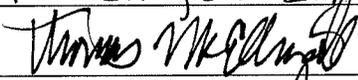
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ATTACHMENT "G"
NON-INTERRUPTION OF WORK AGREEMENT

By submission of the bid for:

The bidder agrees that if this bid is accepted, he/she will not intentionally engage in any course of conduct or activity, or employ for the purposes of performing the public work, any subcontractors, employees, labor or materials which will or may result in the interruption of the performance of the public work due to labor strife or unrest by workmen employed by the bidder or by any of the trades working in or about the public works and/or premises where the work is being performed.

Firm: T. McElligott Inc.

By: 
(Signature)

Thomas McElligott
(Typed)

Title: President

Date: 4 | 4 | 2024

AIA DOCUMENT A310

BID BOND

KNOW ALL MEN BY THESE PRESENTS, that we
589 River Street, Troy, New York 12180
as Principal, hereinafter called the Principal, and

T. McElligott, Inc.,
Fidelity and Deposit Company of Maryland

a corporation duly organized under the laws of the State of Maryland
as Surety, hereinafter called the surety, are held and firmly bound unto
Albany County Dept of General Services Purchasing, 112 State St, Albany, NY 12207
as Obligee, hereinafter called the Obligee, in the sum of Five Percent of bid amount-----

----- Dollars (5% of bid amount) ,

for the payment of which sum well and truly to be made, the said Principal and the said Surety, bind ourselves,
our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the Principal has submitted a bid for
Lawson Lake Camp
HVAC Work

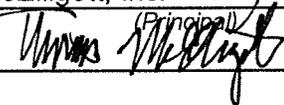
NOW, THEREFORE, if the Obligee shall accept the bid of the Principal and the Principal shall enter into a
Contract with Obligee in accordance with the terms of such bid, and give such bond or bonds as may be
specified in the bidding or Contract Documents with good and sufficient surety for the faithful performance
of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof, or
in the event of the failure of the Principal to enter such Contract and give such bonds, if the Principal shall
pay to the Obligee the difference not to exceed the penalty hereof between the amount specified in said bid
and such larger amount for which the Obligee may in good faith contract with another party to perform the
Work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and
effect.

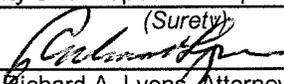
Signed and sealed this 28th day of March 20 24

(Witness)



(Witness)

T. McElligott, Inc.
{ BY:  (Principal) (Seal)

Fidelity and Deposit Company of Maryland
{ BY:  (Surety) (Seal)
Richard A. Lyons, Attorney-in-Fact

Individual Acknowledgment

State of _____
County of _____ } ss.

On this _____ day of _____, 19 _____ before me personally came

_____, to me known, and known to me to be the individual described in and who executed the foregoing instrument, and acknowledge to me that he executed the same.

My commission expires _____

Notary Public

Firm Acknowledgment

State of _____
County of _____ } ss.

On this _____ day of _____, 19 _____ before me personally came

_____, to me known, and known to me to be a member of the firm of _____ described in and who executed the foregoing instrument, and he thereupon acknowledged to me that the executed the same as and for the act and deed of said firm.

My commission expires _____

Notary Public

Corporation Acknowledgment

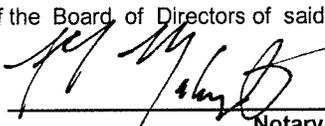
State of New York } ss.
County of Rensselaer

On this 4 day of April, 20 24 before me personally came

Thomas McElligott, to me known, who being by me duly sworn, did depose and say that he/she is the President of T. McElligott Inc.

the corporation described in and which executed the above instrument; that he/she knows the seal of said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of said Corporation, and that he/she signed his/her name thereto by like order.

My commission expires 2/23/2026


Notary Public

Surety Acknowledgment

State of New York
County of Onondaga } ss.

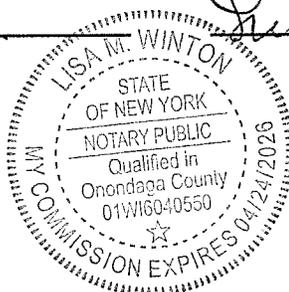
On this 28th day of March, 20 24 before me personally came

Richard A. Lyons, to me known, who, being by me duly sworn, did depose and say that he is an attorney-in-fact of Fidelity and Deposit Company of Maryland

the corporation described in and which executed the within instrument; that he knows the corporate seal of said corporation; that the seal affixed to the within instrument is such corporate seal, and that he signed the said instrument and affixed the said seal as Attorney-in-Fact by authority of the Board of Directors of said corporation and by authority of this office under the Standing Resolutions thereof.

My commission expires 2026

Lisa M. Winton
Notary Public



**ZURICH AMERICAN INSURANCE COMPANY
COLONIAL AMERICAN CASUALTY AND SURETY COMPANY
FIDELITY AND DEPOSIT COMPANY OF MARYLAND
POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS: That the ZURICH AMERICAN INSURANCE COMPANY, a corporation of the State of New York, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, a corporation of the State of Illinois, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND a corporation of the State of Illinois (herein collectively called the "Companies"), by **Robert D. Murray, Vice President**, in pursuance of authority granted by Article V, Section 8, of the By-Laws of said Companies, which are set forth on the reverse side hereof and are hereby certified to be in full force and effect on the date hereof, do hereby nominate, constitute, and appoint **Roy S. MOORE, III, Linda C. SHULTS and Richard A. LYONS, of Syracuse, New York, EACH**, its true and lawful agent and Attorney-in-Fact, to make, execute, seal and deliver, for, and on its behalf as surety, and as its act and deed: any and all bonds and undertakings, and the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the ZURICH AMERICAN INSURANCE COMPANY at its office in New York, New York., the regularly elected officers of the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY at its office in Owings Mills, Maryland, and the regularly elected officers of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at its office in Owings Mills, Maryland, in their own proper persons.

The said Vice President does hereby certify that the extract set forth on the reverse side hereof is a true copy of Article V, Section 8, of the By-Laws of said Companies and is now in force.

IN WITNESS WHEREOF, the said Vice-President has hereunto subscribed his/her names and affixed the Corporate Seals of the said **ZURICH AMERICAN INSURANCE COMPANY, COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and FIDELITY AND DEPOSIT COMPANY OF MARYLAND**, this 28th day of May, A.D. 2020.



ATTEST:
ZURICH AMERICAN INSURANCE COMPANY
COLONIAL AMERICAN CASUALTY AND SURETY COMPANY
FIDELITY AND DEPOSIT COMPANY OF MARYLAND

By: *Robert D. Murray*
Vice President

By: *Dawn E. Brown*
Secretary

**State of Maryland
County of Baltimore**

On this 28th day of May, A.D. 2020, before the subscriber, a Notary Public of the State of Maryland, duly commissioned and qualified, **Robert D. Murray, Vice President and Dawn E. Brown, Secretary** of the Companies, to me personally known to be the individuals and officers described in and who executed the preceding instrument, and acknowledged the execution of same, and being by me duly sworn, depose and saith, that he/she is the said officer of the Company aforesaid, and that the seals affixed to the preceding instrument are the Corporate Seals of said Companies, and that the said Corporate Seals and the signature as such officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year first above written.



Constance A. Dunn, Notary Public
My Commission Expires: July 9, 2023

THE FIDELITY AND DEPOSIT COMPANY

OF MARYLAND
1299 Zurich Way Schaumburg, IL 60196

Statement of Financial Condition
As Of December 31, 2022

ASSETS	
Bonds.....	\$ 219,365,765
Stocks.....	17,619,752
Cash and Short-Term Investments.....	2,767,685
Reinsurance Recoverable.....	12,309,422
Federal Income Tax Recoverable.....	0
Other Accounts Receivable.....	32,200,768
TOTAL ADMITTED ASSETS.....	\$ 284,263,392

LIABILITIES, SURPLUS AND OTHER FUNDS	
Reserve for Taxes and Expenses.....	\$ 545,031
Ceded Reinsurance Premiums Payable.....	42,850,834
Remittances and Items Unallocated.....	0
Payable to parents, subs and affiliates.....	0
Securities Lending Collateral Liability.....	0
TOTAL LIABILITIES.....	\$ 43,395,865
Capital Stock, Paid Up.....	\$ 5,000,000
Surplus.....	240,867,527
Surplus as regards Policyholders.....	240,867,527
TOTAL.....	\$ 284,263,392

Securities carried at \$78,455,274 in the above statement are deposited with various states as required by law.

Securities carried on the basis prescribed by the National Association of Insurance Commissioners. On the basis of market quotations for all bonds and stocks owned, the Company's total admitted assets at December 31, 2022 would be \$266,908,407 and surplus as regards policyholders \$223,512,542.

I, LAURA J. LAZARCZYK, Corporate Secretary of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, do hereby certify that the foregoing statement is a correct exhibit of the assets and liabilities of the said Company on the 31st day of December, 2022.

Laura J. Lazarczyk

Corporate Secretary

State of Illinois }
City of Schaumburg } SS:

Subscribed and sworn to, before me, a Notary Public of the State of Illinois, in the City of Schaumburg, this 15th day of March, 2023.



Ryan Horgan

Notary Public

EXHIBIT E

 **AIA[®] Document A305[™] – 1986**

Contractor's Qualification Statement

The Undersigned certifies under oath that the information provided herein is true and sufficiently complete so as not to be misleading.

SUBMITTED TO:

ADDRESS:

SUBMITTED BY: T. McElligott Inc.

NAME: Tom/Matt McElligott

ADDRESS: 589 River Street, Troy, NY 12180

PRINCIPAL OFFICE:

- Corporation
- Partnership
- Individual
- Joint Venture
- Other

NAME OF PROJECT (if applicable):

TYPE OF WORK (file separate form for each Classification of Work):

- General Construction
- HVAC
- Electrical
- Plumbing
- Other (please specify)

ADDITIONS AND DELETIONS:

The author of this document has added information needed for its completion. The author may also have revised the text of the original AIA standard form. An *Additions and Deletions Report* that notes added information as well as revisions to the standard form text is available from the author and should be reviewed. A vertical line in the left margin of this document indicates where the author has added necessary information and where the author has added to or deleted from the original AIA text.

This document has important legal consequences.

Consultation with an attorney is encouraged with respect to its completion or modification.

This form is approved and recommended by the American Institute of Architects (AIA) and The Associated General Contractors of America (AGC) for use in evaluating the qualifications of contractors. No endorsement of the submitting party or verification of the information is made by AIA or AGC.

§ 1. ORGANIZATION

§ 1.1 How many years has your organization been in business as a Contractor? 26

§ 1.2 How many years has your organization been in business under its present business name? 26

§ 1.2.1 Under what other or former names has your organization operated?

§ 1.3 If your organization is a corporation, answer the following:

§ 1.3.1 Date of incorporation: January 14, 1998

§ 1.3.2 State of incorporation: New York

§ 1.3.3 President's name: Thomas McElligott

§ 1.3.4 Vice-president's name(s) Matthew McElligott

§ 1.3.5 Secretary's name:

§ 1.3.6 Treasurer's name:

§ 1.4 If your organization is a partnership, answer the following:

§ 1.4.1 Date of organization:

§ 1.4.2 Type of partnership (if applicable):

§ 1.4.3 Name(s) of general partner(s)

§ 1.5 If your organization is individually owned, answer the following:

§ 1.5.1 Date of organization:

§ 1.5.2 Name of owner:

§ 1.6 If the form of your organization is other than those listed above, describe it and name the principals:

§ 2. LICENSING

§ 2.1 List jurisdictions and trade categories in which your organization is legally qualified to do business, and indicate registration or license numbers, if applicable.

Master Plumbing License City of Troy

§ 2.2 List jurisdictions in which your organization's partnership or trade name is filed.

All pipe fitting, welding, rigging, excavation, misc. steel fabrication, refrigeration, selective demolition

§ 3. EXPERIENCE

§ 3.1 List the categories of work that your organization normally performs with its own forces.

§ 3.2 Claims and Suits. (If the answer to any of the questions below is yes, please attach details.)

§ 3.2.1 Has your organization ever failed to complete any work awarded to it?

No

§ 3.2.2 Are there any judgments, claims, arbitration proceedings or suits pending or outstanding against your organization or its officers?

No

§ 3.2.3 Has your organization filed any law suits or requested arbitration with regard to construction contracts within the last five years?

No

§ 3.3 Within the last five years, has any officer or principal of your organization ever been an officer or principal of another organization when it failed to complete a construction contract? (If the answer is yes, please attach details.)

No

§ 3.4 On a separate sheet, list major construction projects your organization has in progress, giving the name of project, owner, architect, contract amount, percent complete and scheduled completion date.

§ 3.4.1 State total worth of work in progress and under contract:

§ 3.5 On a separate sheet, list the major projects your organization has completed in the past five years, giving the name of project, owner, architect, contract amount, date of completion and percentage of the cost of the work performed with your own forces.

See attached

§ 3.5.1 State average annual amount of construction work performed during the past five years:

7 million

§ 3.6 On a separate sheet, list the construction experience and present commitments of the key individuals of your organization.

See attached

§ 4. REFERENCES

§ 4.1 Trade References:

McBain Electric Troy, NY 518-272-9376
Empire Air Specialties Albany, NY 518-689-4440
Empire Insulation Specialties Schenectady, NY 518-357-0056

§ 4.2 Bank References:

M&T Bank - Sykaway Branch

§ 4.3 Surety:

§ 4.3.1 Name of bonding company:

Zurich Insurance

§ 4.3.2 Name and address of agent:

Brown & Brown Insurance
Linda Shultz 518-371-2111

§ 5. FINANCING

§ 5.1 Financial Statement.

§ 5.1.1 Attach a financial statement, preferably audited, including your organization's latest balance sheet and income statement showing the following items:

Current Assets (e.g., cash, joint venture accounts, accounts receivable, notes receivable, accrued income, deposits, materials inventory and prepaid expenses);

Net Fixed Assets; **Upon request after apparent low bidder**

Other Assets;

Current Liabilities (e.g., accounts payable, notes payable, accrued expenses, provision for income taxes, advances, accrued salaries and accrued payroll taxes);

Other Liabilities (e.g., capital, capital stock, authorized and outstanding shares par values, earned surplus and retained earnings).

§ 5.1.2 Name and address of firm preparing attached financial statement, and date thereof:

§ 5.1.3 Is the attached financial statement for the identical organization named on page one?

§ 5.1.4 If not, explain the relationship and financial responsibility of the organization whose financial statement is provided (e.g., parent-subsiary).

§ 5.2 Will the organization whose financial statement is attached act as guarantor of the contract for construction?

§ 6. SIGNATURE



§ 6.1 Dated at this day of

Name of Organization: T. McElligott Inc.

By: Thomas McElligott

Title: President

§ 6.2

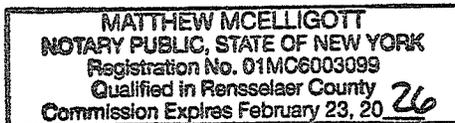
being duly sworn deposes and says that the information provided herein is true and sufficiently complete so as not to be misleading.

Subscribed and sworn before me this day of 20

Notary Public:



My Commission Expires: 2/23/2026



3.5 Construction Contracts in Progress

Agency/ Owner	Niskayuna CSD	Award Date	Jun-22	Completion date	
Contact Person	Katie Lasher	Architect / Engineer	King & King Architects		
Contract No.	Renovations	Prime or Sub	Joint Venture, if applicable	NA	
		Contract Amount	\$1,679,873	Sublet to others	Uncompleted Amount
					239,111.00
Agency/ Owner	WSWHE BOCES	Award Date	Sep-22	Completion date	
Contact Person	Hoods	Architect / Engineer	BCA Architects and Engineers		
Contract No.		Prime or Sub	Joint Venture, if applicable	NA	
		Contract Amount	\$922,907	Sublet to others	Uncompleted Amount
					\$24,079
Agency/ Owner	Indian Lake	Award Date	Mar-23	Completion date	
Contact Person		Architect / Engineer	Mosaic Associates		
Contract No.		Prime or Sub	Joint Venture, if applicable	NA	
		Contract Amount	\$593,000	Sublet to others	Uncompleted Amount
					\$418,912
Agency/ Owner	Ravena CSD	Award Date	Mar-23	Completion date	
Contact Person	John Sharkey	Architect / Engineer			
Contract No.		Prime or Sub	Joint Venture, if applicable	NA	
		Contract Amount	\$597,900	Sublet to others	Uncompleted Amount
					\$369,852
Agency/ Owner	Washington County	Award Date	Nov-23	Completion date	
Contact Person	Matt Jones	Architect / Engineer			
Contract No.	chiller replacement	Prime or Sub	Joint Venture, if applicable	NA	
		Contract Amount	\$586,500	Sublet to others	Uncompleted Amount
					\$210,775
Agency/ Owner	New Lebanon CSD	Award Date	Mar-23	Completion date	
Contact Person	Angie Fiechmann	Architect / Engineer	Mosaic Associates		
Contract No.		Prime or Sub	Joint Venture, if applicable	NA	
		Contract Amount	\$330,000	Sublet to others	Uncompleted Amount
					\$67,967
Agency/ Owner	Troy CSD	Award Date	Mar-23	Completion date	
Contact Person	Jim Gray	Architect / Engineer	UW Marx		
Contract No.	Shool 16	Prime or Sub	Joint Venture, if applicable		
		Contract Amount	\$341,500	Sublet to others	\$0 Uncompleted Amount
					\$215,406
Agency/ Owner	Worcester CSD	Award Date	Aug-23	Completion date	
Contact Person		Architect / Engineer			
Contract No.		Prime or Sub	Joint Venture, if applicable	NA	
		Contract Amount	\$270,309	Sublet to others	\$0 Uncompleted Amount

3.4 Completed Construction Contracts

Agency/ Owner Contact Person Contract No.	Oneida HVAC Clay Hankinson HVAC	Award Date	Mar-19 Amount Architect / Engineer NA	\$788,572	Date Comp	Nov-23
Agency/ Owner Contact Person Contract No.	Trane Steve Young Rensselaer CSD	Award Date	Jun-22 Amount Architect / Engineer N/A	\$518,235	Date Comp	Nov-23
Agency/ Owner Contact Person Contract No.	Windham Ambulance	Award Date	1-Aug Amount Architect / Engineer	\$566,000	Date Comp	Aug-23
Agency/ Owner Contact Person Contract No.	Warren County Countryside Greg Gates Boilers	Award Date	Jan-22 Amount Architect / Engineer NA	1,326,316.48	Date Comp	Nov-23
Agency/ Owner Contact Person Contract No.	Berlin CSD	Award Date	May-21 Amount Architect / Engineer NA	\$807,600	Date Comp	Apr-23
Agency/ Owner Contact Person Contract No.	EGCSD various schools	Award Date	Apr-21 Amount Architect / Engineer NA	\$626,788	Date Comp	Feb-23
Agency/ Owner Contact Person Contract No.	Ulster County Trudy Bunting	Award Date	Aug-22 Amount Architect / Engineer NA	\$405,500	Date Comp	Jun-23

3.5.1 Annual Sales \$ 7,000,000.00

3.6 Thomas McElligott 38 Years project manager
Matthew McElligott 23 Years project manager
Mike McElligott 13 Years project manager
John McElligott 39 Years superintendent
Darin Teal 36 Years superintendent
Joe Teal 14 Years superintendent
Nathan Tybush 15 Years superintendent
Nick Scifo 15 Years superintendent

JAN 26 2024 Apprenticeship Agreement

I. Apprenticeship Agreement Central Office Sponsor No. 22180 ATP Code 13180

Name of Apprentice (Last, First, M.I.) Quinlan, Liam		Social Security Number [REDACTED]	1. Name of Program Sponsor T. McElligott, Inc.	
Address of Apprentice (no. and street) 2540 Hilltop Rd		Physical address of Program Sponsor (no. and street) 589 River Street		
City Niskayuna	County Schenectady	State NY	Zip code 12309	City Troy
Answer both A and B A. Ethnic Group <input type="checkbox"/> Hispanic or Latino <input checked="" type="checkbox"/> Not Hispanic or Latino B. Race <input checked="" type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander		Mailing address of Program Sponsor (no. and street) same		
Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F	Veteran <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Home & Cell phone numbers H C 845 750-7618	Birth date 08/02/1998	2. Trade: <input checked="" type="checkbox"/> Time-based <input type="checkbox"/> Competency-based <input type="checkbox"/> Hybrid Plumber
Has the apprentice received any Certificate of Completion from a State or Federal Apprenticeship Program? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," Trade _____ State _____		3. Start Date 1/11/24	4. Length of program (Months) 60	5. DOL Apprentice Probation Period for Completion Rates (Months) 12
6. Related and Supplemental Instruction (RI) Provider(s) and location(s) CTC -Latham NY		RI Compensated <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. Minimum Journey-Worker Rate \$42 p/hr	
8. Credit for previous training or experience: 12 Months _____ Points _____ Sections _____ <input type="checkbox"/> Reinstatement <input type="checkbox"/> Vocational Education <input type="checkbox"/> Transfer <input checked="" type="checkbox"/> Previous Experience (Employer name): T. McElligott, Inc				

9. Apprentice Wage Progression (Without Benefits) for each Period. Choose one: Months Hours Points Sections

1	2	3	4	5	6	7	8	9	10
12	12	12	12	12					
40%	50%	60%	70%	85%					

The Sponsor and the Apprentice Agree to the Terms on Page 2 of this Form.

Signature of Apprentice and Parent/Guardian if age 16-17: [Signature] Date: 1/11/24
 Signature of Official Sponsor Representative: [Signature] Date: 1/11/24

Registered by the New York State Department of Labor:
 Signature New York State Department of Labor: [Signature] Date: 1/29/24

State Use Only	
Date	Init.
To ATC	<u>[Signature]</u>
To DLEA	<u>[Signature]</u>
Rank Verify	_____
Data Entry	_____

THE DEPARTMENT OF LABOR MUST RECEIVE THIS AGREEMENT WITHIN 30 CALENDAR DAYS OF THE REQUESTED START DATE.

II. Worksite Training Completion or Termination

Check one: Completed Worksite Training Terminated for Cause (Explain in Comments) Quit (Lack of Work) Layoff (Lack of Work) Program Termination Transfer

Completion or Termination Date _____
 Comments _____

State Use Only	
Date	Init.
To ATC	_____
To DLEA	_____
Data Entry	_____

Signature of Official Sponsor Representative _____ Date _____ Print Name _____

THE DEPARTMENT OF LABOR MUST RECEIVE THIS FORM WITHIN 30 CALENDAR DAYS OF THE COMPLETION/TERMINATION DATE.

STATE USE ONLY

III. RI Completion

Apprentice has satisfied the RI requirements. Completion date: _____
 Apprentice has not satisfied the RI requirements.

Signature of DLEA Representative _____ Date _____ Print Name _____

State Use Only	
Date	Init.
To ATC	_____
To DLEA	_____
Data Entry	_____

Apprenticeship Agreement Terms

1. The program Sponsor agrees:
 - a. To employ the Apprentice to learn the craft or trade described above. Training and employment must conform to the terms and conditions for this trade in the Sponsor's registered program.
 - b. That equal opportunity applies to all phases of apprenticeship employment and training. There will be no discrimination because of race, creed, color, religion, national origin, age, sex, disability, veteran status, marital status, or arrest record.
 - c. To give reasonable notice to the Apprentice of any proposed adverse action, unless the collective bargaining agreement provides for another process. Layoff for lack of work does not require an advance notice.
2. The Apprentice agrees:
 - a. To perform diligently and faithfully the work of the trade or craft as presented in the terms and conditions of this program and as outlined in the Work Processes.
 - b. To maintain a record documenting task rotation.
 - i. The Sponsor agrees to ensure compliance.
 - c. To complete or fulfill a minimum of 144 hours of Related and Supplemental Instruction (RI) per year.
 - i. Participation in RI is mandatory.
 - d. That the Sponsor may arrange for the Intra-Program transfer of the Apprentice from one signatory employer to another. This is to ensure training and reasonably continuous employment.
3. The Apprentice and Sponsor agree:
 - a. That the Apprentice has not completed a State/Federal Apprenticeship Program (excluding the Department of Correctional Services) for the trade of indenture or a related trade.
 - b. To comply with the State Labor Law and applicable Regulations, including promptly providing reports and information.
 - c. That a Sponsor that cannot fulfill the obligations under the apprenticeship agreement may (with the consent of the Apprentice) transfer the agreement to another Sponsor of a registered program. The Labor Commissioner must receive written notice of the transfer. The Apprentice must receive full credit for the satisfactory period of the served apprenticeship.
 - d. That the Apprentice is not registered until this form is signed by the authorized New York State Department of Labor representative.
4. During the Department of Labor (DOL) Apprentice Probation Period, the Sponsor or the Apprentice may cancel this agreement without adverse impact on the program's completion rate, however Apprentice turnover may be considered when reviewing the quality of a program's performance.
5. After the DOL Apprentice Probation Period:
 - a. This agreement may be cancelled at the request of the Apprentice.
 - b. The Sponsor may suspend or cancel for good cause. The Apprentice must receive proper notice and must have a reasonable opportunity for corrective action. There must be written notice to the Apprentice and the Department of the final action taken.
6. If a controversy grows from this agreement, it may be submitted to the Apprentice Training Office listed on the front if it is not settled locally or covered by a collective bargaining agreement.

Instructions

I. Apprenticeship Agreement

1. **Sponsor Information Block:** Enter information as it appears on the *Apprentice Training Program Registration Agreement*, (AT 10).
2. **Trade:** Enter the name of the trade the Apprentice will be trained in, as it appears on the AT 10. Indicate the Training Approach.
3. **Start Date (Leave blank if submitting with new program application):** Enter the requested start date of the proposed Apprentice. The Apprentice and Sponsor representative must sign the form either prior to, or on the Apprentice's start date. (Must be received by DOL within 30 days of the start date).
4. **Length of Program:** Enter the term (in months) of the program.
5. **DOL Apprentice Probation Period for Completion Rates:** Enter, in months, 25% of the length of the program, or one year, whatever is shorter.
6. **RI:** Enter the official name of provider and geographic location. Indicate if the Apprentice is compensated while attending RI.
7. **Minimum Journeyworker Rate:** Enter Journeyworker rate as it appears on the AT 10.
8. **Credit for Previous Training or Experience:** When giving credit to an Apprentice, check the correct box, enter the credit in months or points/sections and include a letter of justification. This must have dates, names of previous employers, and a description of the credit acquired.
9. **Apprentice Wage Progression:** Enter the wage rate schedule for the trade as shown on the AT 10.
Signatures: This form must be signed by the Apprentice, Apprentice's parent/guardian (if applicable), and Sponsor representatives. After signing, immediately send it to the Apprentice Training Office indicated in the upper right corner.

II. Worksite Training Completion or Termination

1. **Completion/Termination:** Check the correct box.
 - a. **Completed Worksite Training:** The Apprentice has satisfactorily completed worksite training.
 - b. **Terminated for Cause:** The Apprentice was terminated for cause. Explain in comments section. Examples: Failure to attend/complete RI; Apprentice misconduct; Failure to maintain proper records; Unable to perform duties.
 - c. **Quit:** The Apprentice terminated training by resignation.
 - d. **Layoff (Lack of Work):** The Apprentice was terminated from training by layoff due to lack of work.
 - e. **Program Termination:** The Apprentice was terminated from training because the program was terminated/deregistered.
 - f. **Transfer:** The Apprentice is transferred between programs in the same trade. The Apprentice and Sponsors are all in agreement, and the Apprentice is provided with a transcript of RI and On-The-Job Training by the transferring Sponsor.
2. **Completion or Termination Date:** Enter the exact date the Apprentice completed or was terminated.
3. **Signature:** The official Sponsor representative must sign and date this form.

**NOTICE TO BIDDERS -- ALBANY COUNTY
REQUEST FOR BIDS #2024-037**

Sealed Bids for Lawson Lake Upper Camp Renovation Project as requested by Albany County Department of General Services will be received by the Albany County Purchasing Agent, Room 1000, 112 State Street, Albany, New York 12207 until 11:00 AM, local time on Thursday, ~~March 28, 2024.~~
4/4/24

Request for Bid (RFB) documents may be obtained at the office of the Albany County Purchasing Agent, as noted above. RFB documents may be available for download from the Empire State Bid System website at <http://www.empirestatebidsystem.com> starting by close of business (4:30 p.m.) on **March 14, 2024**

A site visit will be held on **Thursday March 21 2024 @10:00am at the Lawson Lake, Information House, 293 Lawson Lake Road, Feura Bush NY 12067.** This is the only scheduled site visit. Interested bidders are strongly urged to attend.

Pamela O Neill
Purchasing Agent

Dated: Albany, New York
March 8, 2024

PUBLISH ONE DAY – MARCH 14, 2024 -- THE EVANGELIST
PUBLISH ONE DAY – MARCH 14, 2024 -- THE TIMES UNION